



PTO/SB/21 (09-04)

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/606,133
Filing Date	June 25, 2003
First Named Inventor	Paolo Fortina
Art Unit	1634
Examiner Name	Diana B. Johannsen
Attorney Docket Number	CHOP.0182US

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b>  In the event the that a fee is required in connection with this submission and not enclosed, the Commissioner is authorized to charge such fee to the account of the undersigned attorneys, Account No. 04-1406. A duplicate copy of this sheet is enclosed.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	DANN, DORFMAN, HERRELL AND SKILLMAN - Cusotmer No. 000110		
Signature			
Printed name	Robert C. Netter, Jr., Ph.D.		
Date	June 13, 2006	Reg. No.	56,422

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Jane C. Bogan	Date	June 13, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



## FEE TRANSMITTAL

Complete if known

Application Number **10/606,133**  
Filing Date **June 25, 2003**  
First Named Inventor **Paolo Fortina**  
Group Art Unit **1634**  
Examiner Name **Diana B. Johannsen**  
Attorney Docket Number **CHOP.0182US**

TOT. AMT. OF PAYMENT: (1)+(2)+(3) = \$ **225.00**

### METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to:

- ☐ Charge indicated fees  
☒ Charge additional fees  
☒ Credit overpayments

to the account of **DANN, DORFMAN, HERRELL AND SKILLMAN**

Deposit Account Number **04-1406**

2. Payment enclosed:

Checks in the amount of \$ **225.00**

### FEE CALCULATION

#### 1. FILING FEE

Fee Description	Fee Paid
Utility filing fee	_____
Design filing fee	_____
Plant filing fee	_____
Reissue filing fee	_____
Provisional filing fee	_____
<b>SUBTOTAL (1)</b>	<b>\$ _____</b>

#### 2. CLAIMS

	Extra	Fee	Fee Paid
Total Claims Presented	<u>20</u>	<u>0</u>	<u>0</u>
(a)			
Independent Claims Presented	<u>3</u>	<u>0</u>	<u>0</u>
(b)			
Multiple Dependent Claim (first presentation)	<u>4</u>	<u>0</u>	<u>0</u>
(a) Enter 20 or number previously paid for			
(b) Enter 3 or number previously paid for			
<b>SUBTOTAL (2)</b>			<b>\$ _____</b>

### FEE CALCULATION (continued)

#### 3. ADDITIONAL FEES

Fee Description	Fee Paid
Surcharge-late filing fee or oath	_____
Surcharge - late provisional filing fee or cover sheet	_____
Non-English specification	_____
For filing a request for reexamination	_____
Requesting publication of SIR prior to Examiner action	_____
Requesting publication of SIR after Examiner action	_____
Extension for response within first month	_____
Extension for response within <u>second</u> month	<b>225.00</b>
Extension for response within third month	_____
Extension for response within fourth month	_____
Notice of Appeal	_____
Filing a brief in support of an appeal	_____
Request for oral hearing	_____
Petition to institute a public use proceeding	_____
Petition to revive unavoidably abandoned application	_____
Petition to revive unintentionally abandoned application	_____
Issue fee	_____
Petitions to the Commissioner	_____
Petitions related to provisional applications	_____
Submission of Information Disclosure Stmt.	_____
Recording each patent assignment per property (times number of properties)	_____
Filing a submission after final rejection (37 CFR 1.129(a))	_____
For each additional invention to be examined (37 CFR 1.129(b))	_____
Other fee (specify) <u>Advance Order (10 copies)</u>	_____
Other fee (specify) _____	_____

**SUBTOTAL (3) \$ 225.00**

Submitted By:

Typed or

Printed Name Robert C. Netter, Jr., Ph.D.

Signature Robert C. Netter, Jr.

Reg. Number 56,422

Date June 13, 2006

Deposit Account User ID

04-1406